


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 2920.AMEY.PT
Application Number 10/791,961	Filed March 3, 2004	
Title METHOD AND SYSTEM FOR GENERATING AND ORGANIZING INFORMATION IN A MEETING		
Art Unit 3629	Examiner Gabrielle A. McCormick	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65 \$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245 \$ <u>245</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,110	\$555 \$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,730	\$865 \$ _____
<input type="checkbox"/> Five Month (37 CFR 1.17(a)(5))	\$2,350	\$1,175 \$ _____
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Directory is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0881</u> .		
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>44,983</u> . <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
 _____ Signature		<u>11-20-08</u> _____ Date
Paul C. Oestreich _____ Typed or printed name		(801) 478-0071 _____ Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> form submitted.		